

Routine Breast MRI

- Ask patient these questions prior to MRI exam.
 - 1) Have you ever taken any hormones?
 - 2) Have you ever had the depo shot?
 - 3) Have you had any prior breast surgery?
 - 4) Have you ever had a breast biopsy? If so what were the results?
 - 5) Do you have a family history of breast cancer?
 - 6) Do you currently have any masses or lumps in either breast?
 - 7) What was the first day of your last cycle?

- Place patient in two gowns prior to exam. Remove shirt and bra. If patient's pants have zipper, metal buttons, or a metal clip then they will need to be removed. First gown open in the front, and second gown open to the back.

- Patient will also require an IV for exam.

- Use power injector with Dotarem contrast.

- Patient will be placed head first prone with arms above their head (Superman Position) for exam. (Note: if patient has shoulder problems as a last resort they can be placed by their side) It is very important that when pulling up the patients name and information to start exam that Patient Position is **HEAD FIRST PRONE**. If this is not selected exam cannot be read properly by the Breast Imaging Radiologist.

Routine Breast Exam Protocol

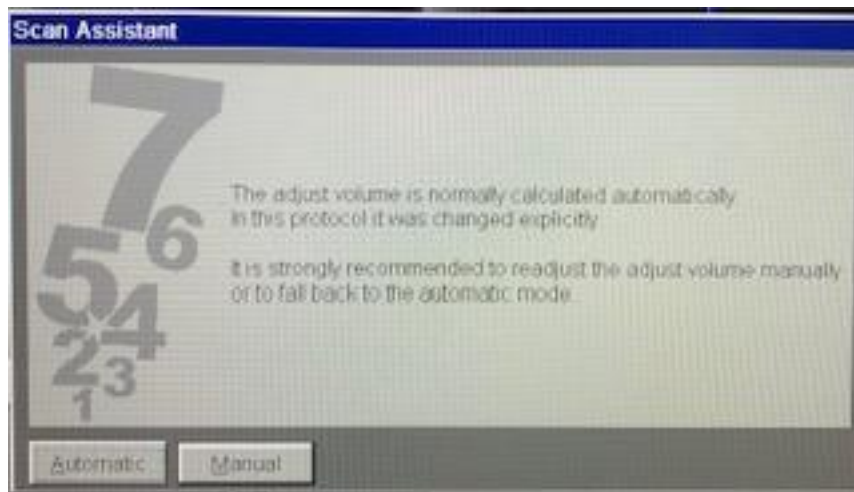
Localizer

Ax_T1_FL3D_non_fatsat

Tirm_ax_BLADE

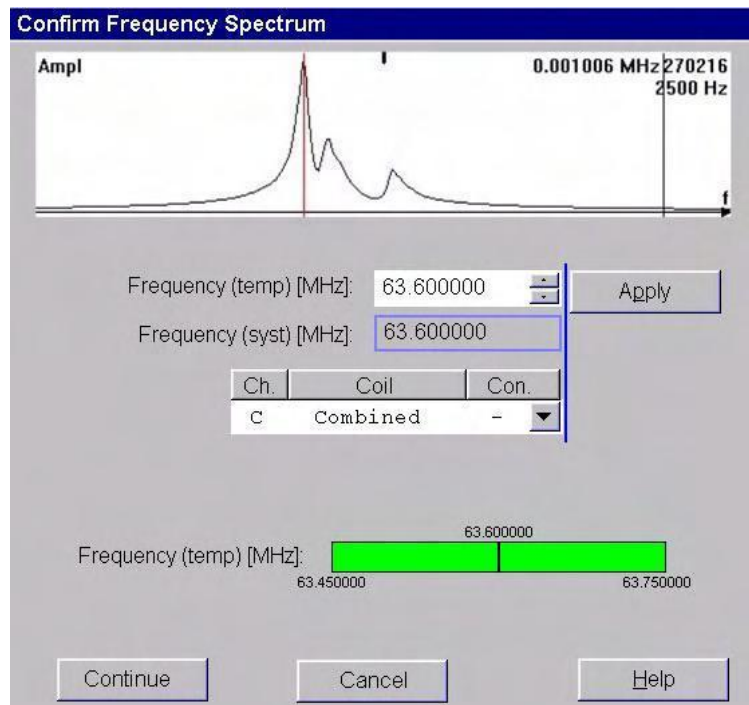
INJECT

DYNAMIC 5 measurements (prior to running sequence confirm frequency box will pop up. Always choose **Manual**



The black tick mark will be over the peak that is on the far right which is water 0Hz. Hover mouse over tick mark, if it does not measure 0Hz, then move mouse until the number is 0Hz, left click on 0Hz, click apply, then click continue. This will insure proper fat sating.)

Routine Breast Exam Protocol Continued...



Make sure that (start sequence, run 1st measurement, then a 60second pause is built into the sequence, during this pause you need to pull up the 1st measurement that has ran and make sure that the fat sat is truly fat sated. If fat sat is not visible, then stop exam DO NOT administer contrast if fat sat is not there). If fat sat is good, then you administer contrast via Power Injector, when 60 second pause has counted down to 20seconds.

T1_fl3d_tra_interVIEWSIPAT3

T1_fl3d_tra_dynaviews_late

When finished with MRI exam, send images to DYNACAD, and email breast imaging rads with answer to all questions stated above.

Implant Integrity Protocol

Localizer

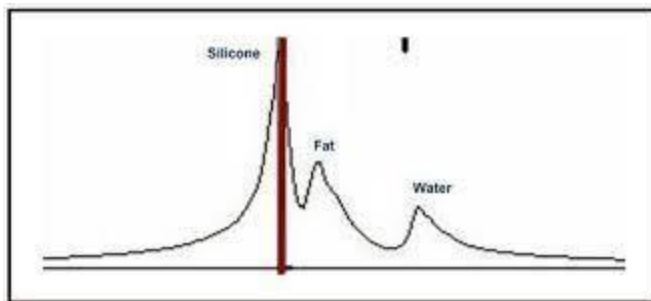
Tirm_ax_WaterSat_bilat (select middle of water peak, click apply, click continue)

Tirm_sag_WaterSat_left (select middle of water peak, click apply, click continue)

Tirm_sag_WaterSat_Right (select middle of water peak, click apply, click continue)

Tirm_ax_Silicone_bilat (select middle of silicone peak, click apply, click continue)

Confirm frequency box:



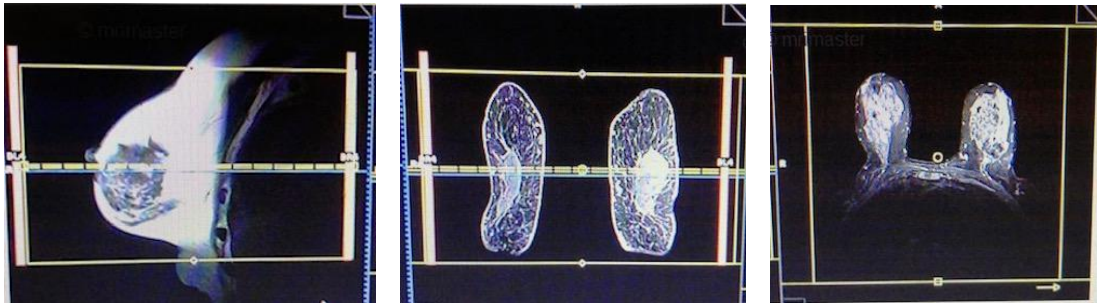
Silicone Frequency- 300hz Fat Frequency- 220hz Water- 0hz

STIR w/ Water Saturation Confirm Frequency: Water and Fat need to be suppressed – The T1 time suppresses the fat. Adjust the system's center frequency to be centered on water to suppress the water. Left click on the peak then select "apply" Only silicone should be bright

STIR Silicone Confirm Frequency: Silicone needs to be suppressed – Adjust the system's center frequency to be centered on silicone to suppress signal from the silicone implant. Left click on the peak then select "apply"

Breast Imaging Coverage

Axial image planning as below:



Sagittal image planning as below:

